

# CLAIMS ONLY

SERIAL NO.

FILING DATE

APPLICANT(S)

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1	/				
2		1	/			
3		1	/			
4		1	/			
5		1	/			
6		1	/			
7		1	/			
8	1	/				
9		1	/			
10		1	/			
11		1	/			
12		1	/			
13		1	/			
14		1	/			
15		1	/			
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TOTAL IND.	23	↓		↓		↓
TOTAL DEP.	16	↔		↔		↔
TOTAL CLAIMS	19					

	★		★		★	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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100						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		↔		↔		↔
TOTAL CLAIMS						

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

BEST AVAILABLE COPY